## STATEMENT OF

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FEC FORM 1		ORGANIZATION													
										0	ffice L	lse On	ly		
NAME OF COMMITTEE (in	ı full)		neck if name changed)		ample:If ty er the lines		oe	12F	E4M	5					
New York \	/alues	PAC	1 1 1 1 1	1 1 1	1 1 1	1 1 1	1 1	1 1	1 1	1 1	ı	1 1	1 1	1 1	, I
		.441 E. Ford	lham Rd												
ADDRESS (number a	nd street)														
(Check if address is changed)		P.O. Box 37	'0794 												
ű	•	Bronx						NY STAT	_ F <b>A</b>	104	458		_ -[ - co	DF 🛦	
COMMITTEE'S E-MA	AIL ADDRES							0.7							
(Check if address is changed)		newyork	/aluespac@	gmail.cc	m										
		Optional Se	econd E-Mail	Address		1 1 1	1 1								, 1
COMMITTEE'S WEB															
(Check if a is changed		nyvaluepac	.com 												
		ı													ı
2. DATE 0	9 30		016 Y												
3. FEC IDENTIFIC	CATION NU	MBER ▶	C	C0062674	47										
4. IS THIS STATEM	MENT X	NEW (N	N) OR		AMI	ENDED (	(A)								
I certify that I have e	examined thi	s Statement	and to the be	est of my	knowledg	e and be	elief it is	s true,	corre	ct and	d con	plete			
Type or Print Name	of Treasurer	Matthew Jo	ohnson												
Signature of Treasure	er <i>Matthe</i>	w Johnson			[Electron	ically File	d]	Date		M 09	/ D	30	/ Y	2016	
NOTE: Submission of			plete information								pena	lties o	 of 2 U	.S.C. §	<b></b> }437g.
Office Use					For further Federal E	n FE				C FORM 1 evised 06/2012)					

Local 202-694-1100